ATTORNEY DOCKET 82395AEK UTILITY PATENT APPLICATION Customer No. 01333 TRANSMITTAL UND 7 CFR 1.53(b) Commissioner for Patents Express Mail Lavel No. **Box Patent Application** EL809162395US Washington, D.C. 20231 Date: October 29, 2001 RECEIVER MEDIA FOR HIGH QUALITY INK JET PRINTING First Named Inventor (or Application Identifier): Constantine N. Anagnostopoulos Enclosed are: Assignment of the invention to Specification  $\overline{\mathsf{X}}$ Eastman Kodak Company 7. Certified copy of a priority Sheet(s) of drawing(s) 2. document. Associate Power of Attorney Information Disclosure Statement Under 37 CFR 8. 3. Combined Declaration for Patent Application and Power of Attorney: 4. 4a. Copy from a prior application (37 CFR 1.63(d) (for continuation/divisional with Box 11 completed) ÀÀ 4b. ij Deletion of Inventor(s). Incorporation by Reference (useable if Box 4b is [] 5. checked) The entire disclosure of the prior application, from Signed statement attached deleting inventor(s) named which a copy of the oath or declaration is supplied under Box 4b, in the prior application, see 37 CFR 1.63(d)(2) and is considered as being part of the disclosure of the accompanying 1.33(b). application and is hereby incorporated by reference therein. If a 111A application prior to examination of the above-identified application, amend the specification at Page 1, 10. after the title, by inserting the following: -- CROSS REFERENCE TO RELATED APPLICATION Į., Reference is made to and priority claimed from U.S. Provisional Application Serial No., [] filed, entitled. ŦŲ, If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: of prior application No:, Continuation Divisional Continuation-in-part (CIP) 11. Please address all written communications to Paul A. Leipold, Patent Legal Staff, 12. Eastman Kodak Company, 343 State Street, Rochester, NY 14650-2201. Please Direct all telephone calls to Arthur E. Kluegel at (716) 477-2625. The filing fee has been calculated as shown below: NO. EXTRA RATE FOR: NO. FILED \$ 740 **BASIC FEE** TOTAL CLAIMS 24 - 20 = x 18 =\$ 72 x 84 = INDEPENDENT CLAIMS - 3 = \$0 MULTIPLE DEPENDENT CLAIM PRESENTED +280\$0 **TOTAL** \$812 Please charge my Eastman Kodak Company Deposit Account No. 05-0225 in the amount of A duplicate copy of this sheet is enclosed The Commissioner is hereby authorized to charge any additional filing fees required under

37 CFR 1.16 or credit any overpayment to Eastman Kodak Company Deposit Account No. 05-0225.

A duplicate copy of this sheet is enclosed.

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